

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Pacific Life Insurance Company Political Action Committee

Full Name (Last, First, Middle Initial)

A. MR. KEVIN A HENDRA

Mailing Address 58 VIAGGIO LN

City State Zip Code
 FOOTHILL RANCH CA 92610-1925

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

AVP TAX

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : PR103631110115

Amount of Each Receipt this Period

80.00

P/R Deduction (\$80.00 Monthly)

Full Name (Last, First, Middle Initial)

B. MR. HOWARD T HIRAKAWA

Mailing Address 23972 GOLDENEYE DR

City State Zip Code
 LAGUNA NIGUEL CA 92677-1332

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

SVP INVESTMENT ADVISOR OPS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : PR103631610115

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Monthly)

Full Name (Last, First, Middle Initial)

C. MS. CAROL A JENSEN

Mailing Address 8554 202ND STREET SW

City State Zip Code
 EDMONDS WA 98026-6643

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Life

Occupation

NATL SLS MGR M CHANNEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : PR103632410115

Amount of Each Receipt this Period

300.00

P/R Deduction (\$300.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

630.00